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PTO/SB/05 (08-03)
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	
First Inventor	Liu,Beizhan
Title	Mr.
Express Mail Label No.	

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i> 3. <input checked="" type="checkbox"/> Specification [Total Pages 11] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 15] 5. Oath or Declaration [Total Sheets 1] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <i>Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</i> 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		
7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies		
ACCOMPANYING APPLICATION PARTS 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other:		

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No.:

Prior application information: Examiner _____ Art Unit: _____
 For CONTINUATION OF DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number:				OR	<input checked="" type="checkbox"/> Correspondence address below
Name	Liu,Beizhan				
Address	204-530 Kingston Road				
City	Toronto	State	Ontario	Zip Code	M4L 1V4
Country	Canada	Telephone	416-6864349	Fax	416-6864349
Name (Print/Type)	Liu,Beizhan			Registration No. (Attorney/Agent)	
Signature	<i>Beizhan</i>			Date	15/09/2003

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

22388 U.S. PTO
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09/16/03



DragonEye System

204-530 Kingston RD. M4L 1V4, Toronto, Ontario Canada
Tel:(416)686-4349 Fax:(416)686-4349 E-mail: ideasway@yahoo.ca

Letter

Date: 15/09/2003

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**To: Commissioner
For Patents**

Organization: P.O.Box 1450
Alexandria VA 22313-1450, USA

From: Liu, Beizhan
Fax: (416) 686-43

Department: General Office
Dragon Eye System Company
Phone: (416) 686-4349

Re: Non-provisional Patent Application

Dear Sir/Madam,

I would like to submit my patent application with this letter. Hereunder are the items included in this letter.

• Application Data sheet	1 page;
• Fee Transmittal	1 page;
• Utility Patent Application Transmittal	1 page;
• Declaration	2 pages;
• Descriptions	7 pages;
• Claims	3 pages;
• Abstract	1 page;
• Drawings	15 pages;
• Priority document	4 pages;
• Cheque	1 item USD\$402

Please acknowledge me when you receive this letter with above items.

Thanks for your help in my patent application.

Best Regards,

Rejhan Linn

Liu, Beizhan

Manager

Fee Transmittal

Small Entity
Small Business Concern

Total Fees Authorized: \$402

Basic Filing Fee

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	1001/2001	\$375

Extra Claim Fees

Total Claims	Fee Code	Fee	Extra Claims	Fee Paid
23	1202/2202	\$9.0	3	\$27

Subtotal For Extra Claims Fees: \$27